

(2)

**MULTIPLE DEPENDENT CLAIM  
FEE CALCULATION SHEET**  
(FOR USE WITH FORM PTO-875)

SERIAL NO.

FILING DATE

**10/576825**

APPLICANT(S)

**CLAIMS**

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
101		/				
102		/				
103		/				
104		/				
105	/					
106		/				
107	/					
108		/				
109		/				
110		/				
111		/				
112		/				
113		/				
114		/				
115		/				
116		/				
117		/				
118		/				
119		/				
120			/			
121			/			
122			/			
123			/			
124			/			
125			/			
126			/			
127			/			
128			/			
129			/			
130			/			
131			/			
132			/			
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136			/			
137			/			
138			/			
139			/			
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143						
144						
145						
146						
147						
148						
149						
150						
TOTAL IND.		↓		↓		↓
TOTAL DEP.		←	1	←		←
TOTAL CLAIMS			20			

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
151						
152						
153						
154						
155						
156						
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189						
190						
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194						
195						
196						
197						
198						
199						
200						
TOTAL IND.		↓		↓		↓
TOTAL DEP.		←		←		←
TOTAL CLAIMS						

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(1)

MULTIPLE DEPENDENT CLAIM  
FEE CALCULATION SHEET  
(FOR USE WITH FORM PTO-875)

SERIAL NO.  
**10/576825**

FILING DATE

APPLICANT(S)

*Act. 19*

CLAIMS

	AS FILED		AFTER 1 <sup>st</sup> AMENDMENT		AFTER 2 <sup>nd</sup> AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
	1	/				
2	/					
3		/				
4		/				
5		/				
6		/				
7		/				
8		/				
9		/				
10		/				
11		/				
12		/				
13		/				
14		/				
15		/				
16		/				
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18		/				
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40		/				
41		/				
42		/				
43		/				
44		/				
45	/	/				
46		/				
47		/				
48		/				
49	/					
50		/				
TOTAL IND.	16	↓		↓		↓
TOTAL DEP.	102	←		←		←
TOTAL CLAIMS	118					

	AS FILED		AFTER 1 <sup>st</sup> AMENDMENT		AFTER 2 <sup>nd</sup> AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
51		/				
52		/				
53	/					
54	/					
55		/				
56		/				
57		/				
58		/				
59		/				
60		/				
61		/				
62		/				
63		/				
64		/				
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81		/				
82		/				
83	/					
84		/				
85		/				
86	/					
87		/				
88		/				
89		/				
90		/				
91		/				
92		/				
93		/				
94	/					
95		/				
96		/				
97	/					
98		/				
99		/				
100		/				
TOTAL IND.		↓		↓		↓
TOTAL DEP.		←		←		←
TOTAL CLAIMS						

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